

I have read this application as required by SEPA and find that it is ☒ not an "action".
5/26/95
DATE
Please follow the attached instructions to avoid unnecessary delays.
5/26/95
SIGNATURE

For Ecology Use
Fee Paid ☒
Date 5/22/95

State of Washington
Application for a Water Right

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name City of Kent, Water Department Home Tel: () -
Mailing Address 220 4th Avenue South Work Tel: (206) 859 - 3395
City Kent State WA Zip+4 98032 + 5895 FAX: (206) 859 - 3664

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☐ Same as above

Name Brad Lake Home Tel: (206) 833 - 0523
Mailing Address 220 4th Avenue South Work Tel: (206) 859 - 3395
City Kent State WA Zip+4 98032 + 5895 FAX: (206) 859 - 3664
Relationship to applicant Water Superintendent

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 7,000 (10MGD) (☒ gallons per minute or ☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s) of Municipal water supply-Industrial, Residential Use. Attach a "legal" description of the place of use. (See instructions.) NOTE: A tax parcel number or a plat number is not sufficient. Place of use-City of Kent Franchise area as described in Kent's Water System Plan. Estimate a maximum annual quantity to be used in acre-feet per year: 6,496 Acre Feet/Year

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:
From / / to / /

RECEIVED
MAY 22 1995

Section 4. WATER SOURCE

DEPT. OF ECOLOGY

If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for three (3) well(s).
Number of diversions:	
Source flows into (name of body of water):	Size & depth of well(s): 24 inch diameter well(s) 300-350 feet

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: On sec. 1n. between sections 7 & 8 in Township 21 Rg 5 EWM 1700 ft North of So Sec 1ns.

1/4 of	1/4 of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
SE 4	SE 4	7	21	5	KING			
SW	SW	8	21	5	KING			

For Ecology Use Date Received: 5/22/95 Priority Date: 5/22/95
SEPA: Exempt/Not Exempt FERC License # Dept. Of Health #
Date Accepted As Complete 5/22/95 By 16 Date Returned By WRIA: 9

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Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named: City of Kent Water System
- B. Briefly describe your proposed water system. (See instructions.)
These three wells will be used to supply water to a surface storage impoundment located at 124th Ave SE and SE 304th Street. The reservoir (impoundment) will be filled during the winter months when there is a surplus of surface and groundwater available, then be filtered for use during the high demand periods of summer. More specific details are described in Kent's Water System Plan (enclosed), pages 65 and 116.
- C. Do you already have any water rights or claims associated with this property or system? ☒ YES ☐ NO
PROVIDE DOCUMENTATION.

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 11,000 Type of connection Industrial and Residential services
existing (Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☒ YES ☐ NO
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department. These wells will become an important source of municipal water supply to meet the needs of Kent's Water System.*

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☒ YES ☐ NO
If yes, when was it approved? 1990 Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☒ YES ☐ NO
If yes, when was it approved? 1993 Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: _____
- B. List total number of acres for other specified agricultural uses:
- | | |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: _____
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 2000 acres? ☐ YES ☐ NO
 2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO
If yes, enter permit no: _____
- E. Farm uses:
Stockwater - Total # of animals _____ Animal type _____ (If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? Permit process begun ☒ YES ☐ NO

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site. Well site - As you leave North Auburn on 8th Street NE, traveling east and cross the Green River bridge, turn north (left) on 102nd Avenue SE. Travel approximately 1/2 mile until the road ends. The well site is North and West of the end of the road, in an undeveloped area along the Green River. The water will be pumped to the site of a future surface storage impoundment located west of 124th Avenue SE and north of SE 304th Street, where it will be filtered for use in Kent's Distribution System.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used? ☐ YES ☒ NO
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

The applicant is the approved Water Purveyor for the City of Kent Franchise area,
where the water will be used by the public for industrial and domestic applications.

B. Does the applicant own the land on which the water source is located? ☐ YES ☒ NO
If no, submit a copy of agreement:

See Attached Easement/Agreement

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me.

Don E. Whitely
Applicant (or authorized representative)

5/17/95
Date

Same
Landowner for place of use (if same as applicant, write "same")

Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98503-0210
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ _____ (date).	

Ecology staff _____ Date _____

To receive this document in alternative format, contact Lisa Newman at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).